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Date: September 9, 2004

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Michelle R. Crosby

Sender: Cindy S. Kaplan/mrc
Re: Issue Fee Payment for U.S. Patent Application No. 09/895,945
Docket No: SYMXP008
Pages: 9 (including cover)

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CENTRAL FAX CENTER****SEP 09 2004****PATENT****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appln. No. : 09/895,945 Confirmation No.: 3828
Applicant : Trevor G. FRANK et al.
Filed : June 29, 2001
TC/A.U. : 1743
Examiner : Brian J. SINES

Docket No. : SYMXP008
Customer No. : 26541
Title : IN-SITU INJECTION AND MATERIALS SCREENING
DEVICE

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Michelle R. Crosby

PETITION TO CORRECT ERROR IN SMALL ENTITY STATUS (37 CFR 1.28(c))

Mail Stop Petitions
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

PETITION

1. Applicants hereby petition to correct an error in small entity status for payment of the Issue Fee.

PATENT ISSUE FEE DUE DATE

2. The Issue Fee for this case was paid on September 1, 2004 (copy attached).
3. The final due date for payment of the Issue Fee for this case is September 28, 2004.

ITEMIZATION OF THE DEFICIENCY PAYMENT

4. The Issue Fee was erroneously paid as a small entity.

Attorney Docket No. SYMXP008**BEST AVAILABLE COPY**

5. The small entity Issue Fee paid on September 1, 2004 is as follows:
Issue Fee for small entity: \$665
(Total payment with Issue Fee transmittal is \$968.00 (Issue Fee : \$665, Publication Fee: \$300, Advanced Order Copy: \$3)
6. The large entity Issue Fee is as follows:
Issue Fee for large entity: \$1330
7. Total Deficiency amount owed for Issue Fee:
\$665

PETITION AND DEFICIENCY FEES

8. The deficiency and petition fee are paid as follows:

Please Charge Deposit Account No. 50-1652 (Order No. SYMXP008) the sum of \$795 (deficiency in Issue Fee: \$665, petition fee: \$130). A duplicate of this petition is attached hereto.

If any additional fees are required, please charge such fees or credit any overpayment to Deposit Account No. 50-0685 (Order No. SYMXP008).

Respectfully submitted,



Cindy Kaplan
Reg. No. 40,043

RITTER, LANG & KAPLAN LLP
12930 Saratoga Ave., Suite D1
Saratoga, CA 95070
(408) 446-8690
(408) 446-8691

Attorney Docket No. SYMXP008

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12930 Saratoga Ave., Suite D1
Saratoga, CA 95070
(408) 446-8690
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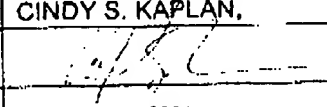
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/895,945	
	Filing Date	June 29, 2001	
	First Named Inventor	FRANK, Trevor G. et al.	
	Group Art Unit	1743	
	Examiner Name	SINES, Brian J.	
Total Number of Pages in This Submission	5	Attorney Docket Number	SYMXP008

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<input checked="" type="checkbox"/> Fee Transmittal Form PTOL 85 (in duplicate) <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 50-1652.
RITTER, LANG, & KAPLAN LLP SEP 03 2004 DOCKETED		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm and Individual name	RITTER, LANG & KAPLAN LLP CINDY S. KAPLAN, Reg. No. 40,043
Signature	
Date	September 1, 2004

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown: September 1, 2004			
Typed or printed name	Michelle R. Crosby	Date	September 1, 2004
Signature			

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P.O. Box 1450
Alexandria, Virginia 22313-1450
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Michelle Crosby (Depositor's name)
9-1-04 (Date)
(Signature)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/895,945	06/29/2001	Trevor G. Frank	1012.076(90-134)	3828

TITLE OF INVENTION: IN-SITU INJECTION AND MATERIALS SCREENING DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	09/28/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS		
SINES, BRIAN J		1743	422-068100		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.362).

- ☐ Change of correspondence address (w/ Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Ritter, Lang &
Kaplan LLP
2.
3.

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY and STATE OR COUNTRY)

Symyx Technologies, Inc. Santa Clara, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee
☒ Advance Order - # of Copies 1

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☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1652 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) Cindy S. Kaplan, Reg. No. 40,043 (Date) 9-1-04

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Michelle Crosby

(Depositor's name)

(Signature)

(Date)

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1. Ritter, Lang &
Kaplan LLP

2. _____

3. _____

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(Authorized Signature)

(Date)

Cindy S. Kaplan, Reg. No. 40,043

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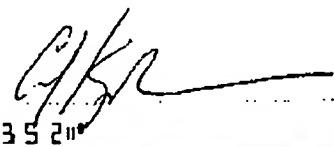
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In the United States Patent & Trademark Office
FILING ACKNOWLEDGMENT

Mailing Date:	September 1, 2004	Application	09/895,945
Atty Docket:	SYMXP008	Filing Date	June 29, 2001
Applicant	FRANK, Trevor G. et al.	Atty/Sec	CSK/mrc
Title:	IN-SITU INJECTION AND MATERIALS SCREENING		

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